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Dr. Brooks: That's something that we can look into. If they can test it in cars, then they should be able to test it in blood and urine.

Caller: Yeah.

Dr. Brooks: It's not the test, it's just that the Department of Health doesn't do the blood and the urine. We do the [inaudible 00:00:15] samples.

Caller: Yeah. That's true. Sean O'Keeffe is the one that said that the guy was out sick on the day that the doctor called, and that's why they couldn't get it for a week.

Dr. Brooks: That's what he told me.

Caller: He didn't say who the guy was though?

Dr. Brooks: No. He said that (Patient Name) already knew what chemicals were being used, but I don't know if (Patient Name) had gotten back to the physician on that.

Caller: Yeah. It just seems concerning a whole week would go by and they ...

Dr. Brooks: Tell me what happened. He drove by, he smelled it.

Caller: He was driving by ...

Dr. Brooks: How far away was he from where the spraying was?

Caller: About twenty feet I believe he said. They were spraying right next to the side of the road. The field right next to the side of the road. He smelled it way before he got there, so he had the windows down, dog in the car, and all of a sudden it was a very, very strong chemical smell, and of course you don't think that you're being sprayed. He drove along a little bit more so he was following ... It can be kind of slow traffic out there, and then finally came around ... There's kind of a dip in the road, I believe, and came around and he saw the tractor in the field and he was like, "Oh, my God. That's it."

He tried to roll the windows up but then of course the whole car was already ... He had made it worse, almost. He basically had to drive along for a few more minutes, and then was able to air the car out.

Dr. Brooks: I looked those chemicals up when Sean sent them to me, so I do have that knowledge. Some of them have really strong odors. What health effects did he have?

Caller: I believe his skin was itchy, burning eyes, his throat felt weird and he had a headache for a couple of days.

Dr. Brooks: Some of these are irritants and headaches.

Caller: And then woke up with an elevated heart rate the first night, and I don't know if that ... Who knows? I don't know if that's a sign of it or not, but ...

Dr. Brooks: Then the doctor couldn't get the names of the chemicals. Do you have anything from (Patient Name)?

Caller: I do now. Yeah, but this is ...

Dr. Brooks: When (Patient Name) went to the hospital the doctor didn't have any idea what had been used?

Caller: No. Only from what (Patient Name) could tell him from what-

Dr. Brooks: Okay. (patient name) had a couple of the ...

Caller: Yeah. He had some of them, but it's still a concern that HC&S didn't get ... The doctor called, asked for a list. Jeff [Kremetsky 00:02:51] at HC&S said I'll email you one right now, and six days went by and nothing. Of course, Lester ...

Dr. Brooks: It sounds like you guys called Jenny [Presler 00:03:03] and they sent it back to Ag.

Caller: Yeah. They kept calling the head of the Department of Health and they wouldn't-

Dr. Brooks: Do you know, so who did they talk to up there?

Caller: I don't know. They said they called the Department of Health several times, and they kept referring them to Lester [Chen 00:03:17], and the Department of Health asked for Doctor [Pang's 00:03:20] number and they wouldn't give it. They kept referring back to Lester Chen, who is not a doctor. I don't think he has any training in medical issues.

Dr. Brooks: No.

Caller: I don't think he'd know the first thing of what to tell someone to get tested for. He might know what they sprayed, although he admitted he didn't, so I don't know what the point of having people call Lester Chen.

Dr. Brooks: Lester could get the herbicides [crosstalk 00:03:50].

Caller: Yeah. He could, but he didn't. That's the thing.

Dr. Brooks: He didn't, and then the Poison Control Center. They have 24/7 medical toxicologists could advise the physician.

Caller: Yeah. The doctor was going on a list that he wasn't sure was right, wasn't sure was complete, and neither the Department of Ag, the Department of Health or HC&S did anything about it to make it so the doctor had information to treat somebody, which it's appalling. The ball was dropped in so many different arenas, and I don't know if there's

a state law or a federal law against Lester actually releasing that information to the patient, but it seems odd that you'd have to have your doctor start contacting the actual company that might have been the one that subjected you to chemical drift.

It seems like a very weird conflict of interest, kind of uncomfortable thing for a patient to have to do. To have to give their personal information to a private company that might have been the one that poisoned them with herbicides.

Dr. Brooks: Lester basically said he would release it to the doctor. That's right, and not to (Patient Name) [crosstalk 00:05:09].

Caller: Yes, but then you're giving your personal information to Lester Chen. Your medical information, which to me is violating so many HIPAA laws I can't even ...

Dr. Brooks: The Department of Ag, they need to know if somebody was exposed in order to do their investigation.

Caller: That's the thing, is he didn't know, so HC&S knew, but HC&S was insisting a doctor call them directly which is really inappropriate. Department of Ag didn't try ... Said he tried to find out, but didn't, and still said your doctor has to call me for anything.

Dr. Brooks: Yeah. We typically do work with the doctors. I could have called HC&S, gotten the information, and I would have given it to the physicians. That's typically how we work.

Caller: For some reason they wouldn't give anyone's number except Lester Chen's at the Department of Health. It was a little bit odd that they kept referring back to Lester, and then Lester didn't have it, and then HC&S said they would send it, then they didn't send it, and then a week later they spoke with you, Sean spoke with you, from HC&S, and said, "Oh, our worker was out sick."

Dr. Brooks: How is (Patient Name) now?

Caller: A few days of symptoms. I think he's doing better, but worried that probably he was ... This whole cocktail of different herbicides I wouldn't want in my bloodstream at any point. Just waiting to, probably to ... I think some of the tests are coming back soon.

Dr. Brooks: Did he find somebody to do biomonitoring? I mean on the pesticides that were used?

Caller: I don't know. Someone suggested going in for a gene toxic buccal smear.

Dr. Brooks: I don't know what that is. What is that? Gene toxic ...

Caller: A gene toxic buccal smear would test for chromosomal damage.

Dr. Brooks: That would be hard to trace back to herbicides. The most direct way would be find some research lab that does biomonitoring for herbicides.

Caller: Yeah. That would have been great except HC&S purposely stalled for a week. I'm guessing that's kind of ... The attitude of everyone in Department of Ag and HC&S was kind of like, "We don't know. We can't tell you, and maybe you'll wait long enough ... " I'm guessing to do actual monitoring it needs to be done within twenty-four to forty-eight hours.

Dr. Brooks: Yeah. Probably, because these are herbicides. They're cleared relatively quickly.

Caller: Is Sean O'Keeffe one of their top people?

Dr. Brooks: Sean. Yeah, I think he works on the environmental side of things.

Caller: Do you know, if they have a worker that's impacted, do they call 911 or do they have a private contract with the ambulance company?

Dr. Brooks: I don't know. Again, I don't know how they deal with that.

Caller: Have you ever dealt with any other overspray [before 00:08:34] with them?

Dr. Brooks: [inaudible 00:08:38] ... GMO issues on Kauai on overspray, and the glyphosate. Remember that from a helicopter?

Caller: Yeah.

Dr. Brooks: Yeah, so that was HC&S.

Caller: Yeah. That case is still not closed either, and those people had significant health impacts that were sprayed. As far as I know that helicopter company that does the contract for HC&S is still spraying.

Dr. Brooks: Yeah. The Department of Ag, they won't let me know either about what their investigations are. They don't share that information with me, but they typically call me when they get an exposure like what happened to (Patient Name). I was surprised that I didn't get the call, but then Sean called me several days later.

Caller: Yeah. It was actually so bad that Lester had (Patient Name) escort him back to the site. This was about three hours later. Kevin escorted him back, they both got out of their cars and the smell was so strong that Lester said, "Get back in your car immediately. Just leave. I will take care of it. You don't need to breathe anymore in." Now it turns out when I'm starting to look up some of the labels, they were in complete violation of the law with the wind speeds, I mean like criminally in violation of the law. One of them is ten miles an hour or less, the other is fifteen mile an hour or less, and the wind speed started out that morning at fourteen sustained, with gusts to twenty-one and they ended at twenty-one to twenty-eight miles an hour by the time they were wrapping up.

Dr. Brooks: Does Lester have that information?

Caller: Lester is supposed to have that information. I don't know if he cares to get it or will. He knows. He knew when he got out of the car. He was like, "Wow. It's really windy." Whether or not, just based on the past enforcement of different complaints, who knows where it will go? They haven't closed a complaint in years. That's one of the concerns, is just the follow through of enforcement. To me a case like this should be an immediate reason to revoke their spray permit, just period, because they were spraying when wind speeds were double what they should have been and they knew it.

(Patient Name) wasn't the only one. There was at least two more people I know of that contacted Lester that were exposed that day.

Dr. Brooks: Okay. Yeah. Good to hear about that.

Caller: If those two people did, that means there was a countless number of others who just didn't know who to call, or smelled it and was like, "Whatever. I can't do anything about it." Guaranteed there were multiple ... Probably there were hundreds of people that drove by and had to breathe that stuff in.

Dr. Brooks: It's twenty feet away, right? You said twenty feet from the car.

Caller: Yeah. Twenty feet into the field. It was close to the road, although it wasn't so close that you should be ... They shouldn't have been spraying that day, period. I question whether they should be mixing these six chemicals together and spraying them.

Dr. Brooks: Yeah. That's going to be up to whether that's appropriate for the label. I'm pulling up one of them. One of them, amine 2,4-D weedkiller. [inaudible 00:12:15] a fishy, a really stinky, fishy, amine-like odor. It's amber to nearly black. Was that what he smelled? A really bad, fishy odor.

Caller: I don't know. He said it was so intense, the chemical smell, that I'm sure it was the combination of all of them. It was much less intense when they went back to the site later, but it was still intense enough for Lester to order him back into his car.

Dr. Brooks: Rifle herbicide is amber to brown liquid with a pungent odor.

Caller: Yeah. 2,4-D is fifteen miles an hour or less, and you're not supposed to spray it within two hundred and fifty feet upwind of any residential or sensitive areas and there's homes right there too. Rifle, I believe is the one where it's ... Maybe it's diuron, ten miles an hour or less, so a blatant violation of the law, and people were exposed. That's the crazy thing. It wasn't like they were spraying this in a field two miles from any roads or homes. They were spraying it right next to a highly populated residential community in fifteen to twenty-eight mile an hour winds and a whole cocktail of them. No idea on what labs you would send any biomonitoring stuff to?

Dr. Brooks: I could look up to see who does ... I don't think it's a clinical lab that will do it. Other than a biomonitoring like urine or blood, there's no like blood test, like an

acetylcholinesterase that I'm aware of that would be specific to these compounds. I'll see if there's any commercial labs that do biomonitoring of these types of chemicals.

Caller: Okay. Sean O'Keeffe didn't by any chance give you the name of the employee that was out sick, did he?

Dr. Brooks: No. (She called back to confirm that it was Jeff Kermode)

Caller: What's that?

Dr. Brooks: Wouldn't it be ... Let's see. No. I don't know. I don't know who it was. You could call Sean and ask him.

Caller: Yeah. No. I'd rather not. I don't like dealing with HC&S.

Dr. Brooks: Okay.

Caller: I'd hate to have my personal information ... Yeah. That's the problem with having people call them when something happens, and not having their doctor have to call them instead of just releasing the information to the Department of Ag, and dealing with it that way. Even that's kind of a little bit shady.

Dr. Brooks: Do you want me to call Jeff and then call you back?

Caller: That'd be great if you could find out which employee was out-

Dr. Brooks: Call Sean, ask him what employee it was.

Caller: Yeah, and how long they were out sick for. I'd be curious, because he waited six days to send it, or seven. The overspray happened on a Wednesday. That employee was out on a Thursday. Did he come back on Friday? Monday? The next week, or was he out?

Dr. Brooks: The doctor might have this information, because I think he might have emailed the doctor on this.

Caller: He did, but he didn't say anything about why he delayed.

Dr. Brooks: Okay.

Caller: It seems like a very pertinent question, like six days and you had an actual member of the public allegedly oversprayed.

Dr. Brooks: I'll ask Sean can he release that information.

Caller: What would you do, say the Department of Ag, I know they haven't in the past let you know about the homes that they test that show up positive for herbicides, what would you do when that happens?

Dr. Brooks: Our office basically works on the medical side of things, and they do the investigation side, so if (Patient Name) had been experiencing health effects and called me we would get her in touch again with the Poison Control Center.

Caller: She did. She had many, many health effects. Her blood pressure was elevated for a couple of weeks. She was actually diagnosed with diabetes a little ways later and has now started to wonder whether that was because of the overspray. All kinds of stuff. It would have seemed like it would have been standard-

Dr. Brooks: Yeah. We would have gotten her in touch with the Poison Control Center. We log all the complaints, but the Ag in Hawaii, Department of Ag does all the investigations.

Caller: Whose responsibility in the Department of Ag is it to notify you when there is a health issue?

Dr. Brooks: All the inspectors will do that. What they typically do though, is they tell the person that was sprayed to call me.

Caller: Okay. They don't proactively ... It's not ...

Dr. Brooks: Sometimes they do. It depends on the person, like Anne [inaudible 00:17:20] she works on Kauai, she will tell me that there's illness and give me the phone number, but a lot of times the inspector will just tell them to give me a call. Again, we would be working with the physician and with the Poison Control Center, but we don't have our hands in the investigation at all.

Caller: Yeah. Have you found that people have had negative health impacts from being exposed on Maui or different islands in the past?

Dr. Brooks: It's really hard to prove unless it's an acetylcholinesterase inhibitor, where you can actually do a medical test. A lot of times we'll get complaints where a physician will say, "Well, I've got patients with asthma and their asthma is not getting better, and we think it's pesticide spraying." It's really hard to prove that. Unless somebody comes in with acute symptoms. We have had cases where people have had acute symptoms, typically workers. Not on Kauai, but on Oahu. The acetylcholinesterase test will confirm that.

Caller: Okay. That's permanent damage then sometimes.

Dr. Brooks: No. No. It depends on how much you're exposed to, but typically it should ... These acetylcholinesterase inhibitors, your blood will regenerate, and the nervous system will regenerate, so it shouldn't be permanent unless they were exposed to really, really high levels and then it can be a problem. The acetylcholinesterase inhibitors, those are insecticides. I don't think HC&S uses those. Don't they just use herbicides?

Caller: They do, although I have the MSD sheets for them and some of them are really nasty.

Dr. Brooks: Yeah. An herbicide can be toxic as well, but it's really difficult clinically to show an exposure, because they don't attack the same enzymes that the organophosphates do.

Caller: Yeah. I guess you're needing to test for biometrics for actual active ingredient in your blood. [inaudible 00:19:27].

Dr. Brooks: Right, which I know the local laboratories don't do that. That would be an extra step.

Caller: What would you have as a recommendation because they actually had more recent oversprays in Paia again with homes? What would be your recommendation if someone's home has residual amounts of these six herbicides inside of them?

Dr. Brooks: **To wash them down if you can. Wet mop and clean up.**

Caller: Then if you had carpet would you tear it out?

Dr. Brooks: No. No. I think most of these are water soluble. Just clean. I know that nationally homes close to ag will have higher levels of pesticides and house dust. That's a fact, so the closer you live to a field, the higher the levels are going to be. That doesn't necessarily mean you're going to have the health effects but you do have the levels in your house, so I wouldn't tear out carpeting, **but I would basically clean afterwards (The Dept. of Ag never let homeowners know how to clean their houses. They never informed Dr. Brooks of the positive test results).**

Caller: All the walls, counters, floors, that kind of thing.

Dr. Brooks: Yeah. A lot of these pesticides we use in house anyway. You just keep the dust down so you don't get exposed.

Caller: Yeah. I don't, but maybe some people do. I try not to use anything. Again, if you're near a field, wiping down your house, probably a good idea.

Dr. Brooks: And vacuuming because you're going to have levels in there in the dust.

Caller: Okay. Think that's it. Yeah. If you can get the name of the person that was ...

Dr. Brooks: I'll ask Sean, and I'll also see if there's a lab that would take blood and urine samples and biomonitor for herbicides. I know it's not local. It would have to be shipped to the mainland.

Caller: Okay, and you have my number?

Dr. Brooks: Yes. Could you give that to me again?

Caller: Yeah. **(caller Name)**

Dr. Brooks: Okay. I'll get back to you.

Caller: Perfect. Appreciate it, Doctor Brooks. Have a good day.

Dr. Brooks: Bye-bye.

Caller: Bye.

Doctor Barbara Brooks. December 16th, 2015.

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